To: All Staff

From: Nancy Jones, Executive Director, Heartly House

Date: October 1, 2014

Regarding: The Lethality Assessment Program and High-Danger Victims

Staff:

As you know, we are the primary domestic violence service program in Washington, Adams, and Frederick counties. We recently agreed to partner with six local law enforcement agencies in implementing the Lethality Assessment Program – Maryland Model (LAP), a multi-pronged homicide prevention intervention designed by the Maryland Network Against Domestic Violence (MNADV) to identify victims of domestic violence at greatest risk of being seriously injured or killed by their intimate partners and connect them to their local domestic violence program. In doing so, we committed to providing differentiated and enhanced services to victims of domestic violence who are assessed as being in "High-Danger" (potentially lethal) situations. This includes (but is not limited to) a specific commitment to:

- Train all our Crisis Department and shelter staff Night Managers to field and respond to all LAP calls for service, and to administer the Lethality Screen to identify and assess High-Danger domestic violence victims.
- Prioritize all High-Danger victims for program services, which includes offering in-person appointments within 24 hours of the completion of the Lethality Screen, and following up with all High-Danger victims within 48 hours following the administration of a Lethality Screen (see Follow-Up Protocol for High-Danger Victims).

Below, please find more in-depth additions or amendments to our policies and job responsibilities, effective immediately after our mandatory training for all direct-service staff (evening and daytime) on Wednesday, October 8, from 8:00 am – 10:30 am.

Lethality Assessment Program: Internal Policies and Procedures

Hotline Calls

All hotline staff must have copies of the *Lethality Screen*, *Safety Planning Considerations*, *Conversation Guide for High-Danger Victims*, and the *Domestic Violence Service Program Communication Guidelines* next to the telephone. Before a shift starts, ensure there are copies of each document, ten copies of the Lethality Screen, and writing utensils nearby. We have a limited amount of time on the call and it is crucial that no time is wasted looking for these materials.

Hotline staff should answer the phone using headsets so that staff may move around (to gather documents, to schedule the appointment, etc.) without putting the call on hold.

Setting Appointments

The goal of the LAP hotline call is to connect the victim to us for further services. We must eliminate as many barriers as possible for the victim to walk through our doors. In that vein, we must keep at least two counseling and crisis management appointment slots open and one legal

department appointment slot open every day. These appointments should be filled only by High-Danger victims.

Appointment Reminders

We will call, text, or e-mail appointment reminders for all appointments for High-Danger victims. Front desk staff should check the folders in the red bin at the start of each shift, take note of what form of contact is safe for the victim and whether a message/what type of message may be left, inform all High-Danger victims of their appointment times, and encourage High-Danger victims to resist the temptation not to come in for services.

Shelter Guarantees

We made a commitment to guarantee shelter to any High-Danger victim who requests it. Remember: High-Danger victims are at the greatest risk of homicide, even if their situation does not seem urgent.

If there is not shelter space available or it is not an appropriate space, check with Green Door Motel or Yellow Rose Inn. They have agreed to give us a small number of nights free of charge each year for High-Danger victims who cannot be admitted to our shelter because of space, sex, disability, or administrative reasons. Use the credit card to charge the stay, and I will get reimbursement from their manager. File an expense request form with me the same day you use the card.

Contact the Residential Services Director or on-duty Shelter Manager should any issues arise regarding the sheltering process or if additional assistance is needed establishing the hotel placements.

Intake Procedure

We will not require the "blue folder forms" for High-Danger victims. Prior to receiving services, High-Danger victims only need to fill out the single-sheet form that documents demographic and contact information for the victim, the abuser, and any other household members. We do not want to dissuade High-Danger victims from accessing services by requiring them to go through the lengthy intake process. If a High-Danger victim continues to access services, it may be appropriate to complete the rest of the "blue folder" at subsequent appointments.

"Flagging" High-Danger Victims, Targeting Services

We will file Lethality Screens (both those that our hotline advocates fill out, and the complementary Screens faxed over by the police department), intake forms and case management notes for High-Danger victims in the **purple manila folders**, not the cream-colored folders, which will be reserved only for non-High Danger victims. This will help our case management and legal staff prioritize their daily caseloads, and approach appointments with High-Danger victims with an increased sensitivity to the victim's level of danger. Staff will also **highlight in yellow** the cells pertaining to High-Danger victims in our electronic client management system. When a hotline advocate receives a call, this will allow her/him to quickly see whether the High-Danger victim has utilized our services before and under what circumstances, and incorporate this knowledge into her/his safety planning with the victim over the phone.

When encouraging a High-Danger victim to "come in for services," we are particularly interested in facilitating victims' utilization of:

- Crisis counseling and/or ongoing counseling. This can either happen in-person, as a
 resident or non-resident at Heartly House, or via ongoing, substantive, self-initiated
 telephone conversations with an advocate, regardless of whether the victim physically
 presents her/himself at Heartly House's facilities for services.
 - This is the priority service to emphasize. It allows us to better safety plan with the victim, complete a danger assessment, and provide a positive and supportive experience for the victim.
- Shelter.
- **Legal services.** Specifically, for a victim to petition for a protective order at court, with the pre-arranged assistance of a Heartly House advocate.
- Case management after an initial intake appointment.

Although we offer other services, these categories encompass those that are particularly protective for High-Danger victims.

Non-Officer-Initiated Hotline Calls

Hotline staff should complete the Lethality Screen for any victim of intimate partner abuse who calls the hotline and is not in immediate physical danger AND one of the following:

- mentions any one of the lethality factors(such as unemployment, threats to kill, children in the home that aren't biologically related to the abuser) during the course of the conversation, OR
- who the hotline advocate believes is in danger based on the content of the Hotline call, demeanor of the victim, or the advocate's "gut" feeling, OR
- if the hotline advocate recognizes that it the victim is a repeat caller.

Direct services staff should complete the Lethality Screen for any victim who comes into an appointment and has not already had a Lethality Screen administered or whose circumstances have changed

Follow-Up Procedures

We have committed to providing follow-up services for all High-Danger victims. Victims should receive calls within 48 hours of the initial hotline call, or, if the patrol officer did not call, from receipt of the High-Danger Lethality Screen via fax. The Crisis Services Director has created a tracking form (see *Tracking Form for Follow-Up with Lethality Assessment Program Clients*, at the end of this document) that should be used for every victim. Remember to pay close attention to the victim's wishes (if expressed) of the type of contact, time of day she/he can be safely reached, whether a message can be left, and whether it is safe to identify ourselves as Heartly House.

If there is no guidance, then we will leave three messages (one daytime, one evening, and one weekend), or make five attempts.

Coordinated, Cooperative Care

Departments should meet regularly to discuss High Danger victims, ensure each department is appropriately prioritizing High Danger victims, and to coordinate communication/follow up attempts.

Primary Victims under the Age of 18

If we receive a LAP hotline call for a victim who we have reason to believe is under the age of 18 and the abuser is 18 or older, we may need to make a mandatory report. Nevertheless, we can serve any victim over the hotline, with our food and clothing banks, and the 911 cell phone service. We can serve victims 15 and older in our case management, crisis counseling, and shelter services (without parental permission). If you do not know the age of the victim, but you have a suspicion that he or she is a minor, **do not ask his/her age**. You should treat the victim the same as other High-Danger victims: encourage her/him to come in for services.

See the Crisis Services Director for further training on mandatory reporting.

Limited English Proficiency Victims

Hotline advocates should be aware of the language capabilities of all other staff on duty when you are answering hotline calls. When we receive a LAP call from an officer who is working with a victim who has Limited English Proficiency, if another advocate speaks the victim's preferred language, the call should be handled by the second advocate. This is a high-priority, 10-minute phone call. Because of that, the second advocate must be willing to interrupt whatever he/she is doing to prioritize handling this call.

If there is not an on-duty staff member who speaks the victim's primary language, call Language Line. Instructions are posted by every telephone. Practice calling Language Line so that you are familiar with the process prior to needing to use the service.

Danger Assessments

If the victim consents, all crisis counselors and case managers should complete a Danger Assessment for all High-Danger victims. Explain how the Lethality Screen and Danger Assessment are different, and explain the scores.

Certification is required to administer the Danger Assessment. See the Crisis Services Director for further instructions.

LAP Trainings and Re-Trainings for Staff

All new staff will be trained by the Crisis Services Director in the LAP within two weeks of being hired. "Refresher" trainings for the LAP will be conducted by the Crisis Services Director for already-trained staff on an annual and as-needed basis. Heartly House has also committed to obtaining training for all new crisis counselors and case management staff in the Danger Assessment. Any staff members who are not certified Danger Assessment administrators should refer High-Danger clients to their colleagues for the completion of the assessment.

Lethality Assessment Program: Internal Division of Responsibilities

All Crisis Service Department Staff (including Director and Leads)

- Field incoming LAP calls.
- If direct contact is made with the victim, begin completion of the following forms:

- Client intake, incident form(s), contact sheet, file checklist form, Lethality Screen and safety planning instructions (see MNADV's Safety Planning Considerations).
- Document summary of call in the Redbook.
- Document call on Daily Service Log.
- Register all High-Danger victims for appointment reminder calls.
- Place original Lethality Screen in Lead Crisis Worker's mailbox.
- Place a copy of the Lethality Screen in the victim's purple manila folder.
- Provide in-person crisis intervention services to High-Danger victims.
- Administer Lethality Screens with victims as appropriate.
- Administer Danger Assessments during initial crisis intervention sessions with all High-Danger victims.

Crisis Services Director

- Serve as the agency LAP contact.
- Provide LAP training to all new direct service staff and volunteers within two weeks of hire.
- Provide LAP refresher trainings each year to program direct service staff.
- Review High-Danger cases to ensure appropriate documentation, follow-up and protocols are followed.
- Review LAP outreach spreadsheets to ensure all High-Danger victims are receiving follow-up calls within a 48-hour period of the Lethality Screen being completed.
- Provide individual and group supervision to all members of the crisis department.
- Update staff of any new LAP related best practices, current trends, new research/findings and available trainings.
- Coordinate services and maintain frequent communication with all county LAP contacts, including Law Enforcement, Frederick County courthouse and Frederick Memorial Hospital.
- Facilitate healthy and productive partnerships with our six partner law enforcement agencies by coordinating quarterly LAP meetings with agency chiefs and/or the heads of each respective DV unit.
- Prioritize High-Danger victims for unannounced home visits at the beginning of each week; assign crisis advocate and police officer teams; debrief home visits with teams at the end of each week.
- Draft and disseminate a semi-annual LAP e-newsletter to highlight LAP statistics, trends, challenges and successes.
- Chair local LAP Council.

Lead Crisis Advocate

- Perform and oversee all LAP-related data entry tasks.
- Collect, manage and submit agency and county-wide LAP statistics to MNADV on a biannual basis.

- Review and pair copies of Heartly House Lethality Screen worksheets with the corresponding Lethality Screen (and police report, if applicable) received from law enforcement, FMH and/or the courthouse.
- Maintain frequent communication with all county LAP contacts for the purpose of reviewing and comparing statistics.
- Perform appointment reminder calls the day prior to any High-Danger victim's first appointment.
- Perform follow-up calls no later than 48 hours following the completion of a Lethality Screen.

Crisis Advocates

- Perform appointment reminder calls the day prior to any High-Danger victim's appointment.
- Perform follow-up calls no later than 48 hours following the completion of a Lethality Screen.



Tracking Form for Intake with Lethality Assessment Program Clients

DATE	VICTIM	OFFENDER	CASE #	OFFICER	+	_	В	DNA	SW/ HA	APPT	LEGAL	СМ	CC/OC	SHELTER	C?	NO CALL	LATE CALL ZIP	NOTES Prev
4/24/2014	Doe, Leanne	Doe, Tony	14-000	Hunt	1	0	0	0	1	1	1	0	0	1	1		11111	client, diff abuser
4/23/2014	Doe, Rosa	Doe, John	14-001	Smith	0	0	0	1	0	0	0	0	0	0	0		11112	
4/22/2014	Doe, Latisha	Doe, Juan	14-002	Naylor	0	0	1	0	1	0	0	0	1	0	0		11112	
4/22/2014	Doe, Rhonda	Doe, Joe	14-003	Henke	0	1	0	0	0	0	0	0	0	0	0		11111	Second screen this month

This spreadsheet helps us organize information about victims referred to our program by our partner law enforcement agencies. Upon receiving Lethality Screens from a law enforcement agency, the Lead Crisis Worker can enter the Lethality Screen information. This spreadsheet is organized by **date**, with the most recent Lethality Screen appearing first. Following is the **victim's name**, the **offender's name**, the **case # of the report**, and the **officer's name**. This information is extracted from the very top of the Lethality Screen, before the instructions and 11 questions.

The next four columns—labeled with a + sign, a - sign, the letter **B**, and **DNA**—are meant to record the results of the Lethality Screen. The number **1** is used to indicate a "yes" and the number **0** is used to indicate a "no."

- The + sign indicates that the victim screened in as High-Danger. In this example, Leanne was screened as High-Danger.
- The sign indicates that the victim did not screen in as High-Danger. In this example, Rhonda was a non-High Danger victim.
- The letter **B** indicates that the victim did not screen in based on his/her answers, but that it was the **belief** of the officer that he/she was in High Danger of being severely re-assaulted or killed. In this example, Latisha was screened in based on the officer's belief.
- **DNA** means the victim "did not answer" the Lethality Screen, either because she/he refused to answer officer's questions, or because she/he was unable to answer (e.g. taken to the hospital, inebriated, abuser present, etc.). In this example, Rosa did not answer.

SW/HA indicates that the victim **spoke with one of our hotline advocates**. In this example, Leanne and Latisha agreed to speak with the hotline advocate. The next five columns—labeled with **Appt**, **Legal**, **CM**, **CC/OC**, and **Shelter**—are meant to track whether victims utilize our services.

- Appt means the victim came in for an appointment (not just that one was made) after the date of the Screen. In this example, Leanne kept her appt.
- The other four labels indicate what type(s) of appointment(s) the victim accessed our: **legal services** (petitioned for a protective order at court, with the pre-arranged assistance of a Heartly House advocate), **case management**, **crisis counseling/ongoing counseling** (either in-person, as a resident or non-resident at Heartly House; *or* via ongoing, substantive, *self-initiated* telephone conversations with an advocate, regardless of whether the victim physically presented at Heartly House's facilities for services), and/or **shelter**. Although we have other services, these categories encompass **those that** are **particularly protective for High-Danger victims**. In this example, Leanne accessed legal and shelter; and Latisha engaged in ongoing counseling.

The C? column indicates whether the victim was already a Heartly House client at the date of the Screen. In this example, Latisha appeared in our records before the Screen date. **NO CALL** is marked when the victim was screened in as + (High-Danger) or based on the officer's **B** (belief) and Heartly House was not called. **LATE CALL** means the officer called re: the High-Danger victim, but not until after already having left the scene.

Tracking Form for Follow-Up with Lethality Assessment Program Clients

		DATE OF	,	Outreach (3 message						
VICTIM	CASE #	SCREEN	C?	Action	Date completed	Initials	Notes			
Doe, Leanne			1	LM	4/23/2014	LAH	Doct to call between 44 are 4 are Made			
	14-0011	4/22/2014		LM	4/24/2014 MSR		Best to call between 11am - 1pm. Ma appointment for 4/28 with Michelle.			
				SW	4/25/2014	LAH	appointment for 4/20 with wholiene.			
Doe, Rosa			0	Att	4/23/2014	AKJ				
	14-0012	4/22/2014		Att	4/24/2014	AKJ	Spanish-speaking client. No further attempts – Rosa does not want us to			
				Att	4/25/2014	TCK	check in.			
				SW	4/26/2014	LAH				
Doe, Latisha		4/23/2014	0	NA	4/24/2014	MSR	Aunt answers phone, aware of			
				Att	4/24/2014	MSR	situation, told us to call back in			
	14-0013			NA	4/25/2014	LAH	mornings. Call back every couple days – Latisha does not want an			
				Att	4/25/2014	AKJ	appointment, but consents to ongoing			
				SW	4/26/2014	REP	phone check ins via her Aunt.			

This sample spreadsheet includes
the victim's name, the victim's
unique Heartly House program case
#, the date of the Lethality Screen,
and a description of outreach
attempts. The action should
describe what kind of outreach the
Heartly House advocate made, the
date the action was completed,
and the staff member's initials. Staff
should also record any relevant info
for future follow-up attempts in
notes.

- LM = "left message"
- **SW** = "spoke with" the victim
- Att = "attempted" to call (perhaps the victim had indicated that it wasn't safe to leave a message or did not have an answering machine)
- NA = "not available" (someone else answers and/or the victim cannot take a call at that time)

Once contact is made, and if an appointment is booked or the victim ultimately comes in for our services, this is logged in Heartly House's **Tracking Form for Intake with Lethality Assessment Program Clients.**

Heartly House has made a commitment to follow-up with High-Danger victims in a timely and persistent manner. For our program, this requires:

- Gaining the victim's permission for future contact. For High-Danger victims who agree to speak to one of our hotline advocates during a LAP call, this should be done before asking the victim to hand the phone back to the officer. For High-Danger victims who refuse to speak to the hotline advocate, the hotline advocate should ask the victim through the officer if she/he would agree to a follow-up call from Heartly House.
- Asking if the phone # is safe, if it is safe to leave a message, and if there is a time of day that is best to call.
- The Lead Crisis Advocate and Crisis Advocates placing follow-up calls within 48 hours of completion of the Lethality Screen. If the victim does not respond, we will leave three messages, or make five attempts, at different times of day (morning, evening, and weekends) before terminating contact.
- The Crisis Services Director coordinating teams of Heartly House Crisis Advocates and police officers from one of our partner law enforcement agencies. Similar to the collaboration that occurs between officers and hotline advocates on the scene of a domestic violence incident, home visits communicate to victims the mutual concern of law enforcement and Heartly House, and our commitment to ensuring the victim's well-being.

Tracking Form for Quarterly Data—Lethality Assessment Program

	High Danger	Non- High Danger	Belief	DNA	NO CALL	LATE CALL	SW/HA	Appt	Legal	СМ	CC/OC	Shelter	Previous Client
Heartly House							n/a						
City police agency_1													
City police agency_2													
Sheriff's dept													
TOTAL													

At the end of each quarter, Heartly House will check its data against the data from our partner law enforcement agencies to see if any Screens are missing, and to identify/resolve communication issues with law enforcement.

The column categories are similar to the categories we use in our **Tracking Form for Intake with Lethality Assessment Program Clients.** The numbers in the first six columns are filled from information on the Lethality Screens that were faxed to Heartly House from our partner law enforcement agencies.

- High-Danger reflects the # of High-Danger screens (including BOTH High-Danger screens that were/weren't called in to the hotline)
- Non-High Danger reflects the # of non-High Danger screens
- Belief reflects the # of High-Danger victims identified based on the officer's belief
- DNA (did not answer) reflects the # of victims who refused to/couldn't answer the Lethality Screen
- NO CALL and LATE CALL reflect the # of High-Danger victims for whom the officer either did not contact Heartly House, or did so after having already left the scene
- The SW/HA (spoke with hotline advocate) column reflects the # of High-Danger victims who spoke with a hotline advocate from Heartly House
- The next five columns—Appt (appointment), legal, CM (case management), and CC/OC (crisis counseling/ongoing counseling), shelter—show the # of High-Danger victims who eventually came in for services, and which services they used. As a reminder, here we are documenting only the services that have been found to be particularly protective for High-Danger victims. Legal services means the victim petitioned for a protective order at court, with the pre-arranged assistance of a Heartly House advocate. Case management means the victim came in for an intake appointment and was assigned to a case manager for longer-term assistance. Crisis counseling/ongoing counseling specifies that the victim engaged in counseling, either in-person, as a resident or non-resident at Heartly House's shelter, or via ongoing, substantive, self-initiated telephone conversations with a Heartly House advocate, regardless of whether the victim physically presented at Heartly House's facilities for services. Lastly, shelter means the victim stayed with us for at least one night.
- The **Previous Client** column can be used to track how many of the High-Danger victims encountered by law enforcement and/or Heartly House each quarter are "new" clients (never before seen by us). This is useful in identifying "hidden victims" who, without the Lethality Assessment Program, might not have otherwise come in contact with Heartly House's services.

The numbers that would appear in the **Heartly House** row are for *victim*-initiated hotline calls. Hotline advocates should administer the Lethality Screen to hotline callers if/when they mention any one of the "top 3" questions or any two lethality predictors in the "bottom 8" questions during the course of the hotline call.



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